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3 961 INCIDENT, ACCIDENT, AND DEATH REPORTING 4 5 6 REVISION DATE: (TBD) 7 EFFECTIVE DATE: May 11, 2022 REFERENCES: A.R.S. §8-201(2), §14-1501, §36.551.01, §46-451(A)(1), 8 9 §46-451(A)(5), §41-3801, §41-3803, §41-3804, §8-201, §46-451(A)(7), 10 11 \$46-451(A)(10)-A.A.C. R9-10-101, R9-21-105. AHCCCS Medical AMPM-12 13 Policies 960, 962, 1020, AdSS Medical Policy 960, 1230-A, AdSS Operations 14 15 Manual Policy 417. 16 17 **PURPOSE** 18 19 This policy applies to the Division of Developmental Disabilities' (Division) 20 Administrative Services Subcontractors (AdSS). The purpose of the policy is 21 22 to It establishes the Incident, Accident and Death reporting requirements for the Division of Developmental Disabilities' (Division) 23 Administrative Services Subcontractors (AdSS)the reporting, reviewing, and 24 monitoring of Incident, Accident, and Deaths (IAD) in a consistent manner 25 across the delivery system. 26 27 Scope ¶ 30

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This policy applies to the AdSS and their responsibilities related to any reported incident, accident, and death from any source.



DEFINITIONS

1. "Abuse" means the infliction of, or allowing another individual to inflict, or cause, physical pain or injury, impairment of bodily function, disfigurement or serious emotional damage which may be evidenced by severe anxiety, depression, withdrawal, or untoward aggressive behavior. Such Abuseabuse may be caused by acts or omissions of an individual having responsibility for the care, custody or control of a client receiving behavioral health services or community services.

Abuse shall also include sexual misconduct, assault, molestation, incest, or prostitution of, or with, a client under the care of personnel of a mental health agency. A.A.C. R9-21-101(B).

2. "AHCCCS" means Arizona Health Care Cost Containment System.

Abuse (Of a Child) - As specified in A.R.S. §8-201(2), abuse of a child is defined as follows:¶

function or allowing of physical injury, impairment of bodily

function or disfigurement or the infliction of or allowing another person

to cause serious emotional damage, as evidenced by severe anxiety,

depression, withdrawal or untoward aggressive behavior and which



emotional damage is diagnosed by a medical doctor or psychologistand is caused by the acts of omissions of an individual who has the care, custody and control of a child. Abuse includes:¶

- 1. Inflicting or allowing sexual abuse, sexual conduct with a minor, sexual assault, molestation of a child, commercial sexual exploitation of a minor, sexual exploitation of a minor, incest, or child sex trafficking as those acts are described in the Arizona Revised Statutes, Title 13, Chapter 14.
- 2. Physical injury that results from permitting a child to enter or remain in any structure or vehicle in which volatile, toxic, or flammable chemicals are found, or equipment is possessed by any person for the purpose of manufacturing a dangerous drug as defined in section 13-3401.

3. Unreasonable confinement of a child. ¶

Abuse (Of a Vulnerable Adult) - As specified in A.R.S. §46-451(A)(1), (i) intentional infliction of physical harm, (ii) injury caused by negligent acts or omissions, (iii) unreasonable confinement, or (iv) sexual abuse or sexual assault.



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Community Complaint - A complaint from the community that puts a member or the community at risk of harm. 3. "Community Complaint" means a complaint from the community that puts a Member or the community at risk of harm. "Death No Provider Present" means death of a Member living 4. independently or with family and no Provider is being paid for service provision at the time of death. "Expected Death" means natural death, and may include deaths from 5. long-standing, progressive medical conditions or age-related conditions. "High Profile Case" means a case that attracts or is likely to attract 6. attention from the public or media. - "Expected" (natural), "unexpected" (unnatural), or "no providerpresent" Expected Deaths: May include deaths from long-standing, progressive medical conditions, or age-related conditions, e.g., end-stage cancers, end-stage kidney or liver disease, end-stage HIV/AIDS, end-stage-

Alzheimer's/Parkinson's disease, severe congenital malformations.



Unexpected Deaths: Includes motor vehicle accidents, suicides accidental drug overdoses, homicides, acute myocardial infarction or strokes, trauma/Abuseabuse, sudden deaths from undiagnosed conditions, or generic medical conditions (e.g., seizures, pneumonia, falls) that progress to rapid deterioration.

No Provider Present: Refers to deaths of members living independently or with family and no provider is being paid for service provision at the time of death. The "expected" or "unexpected" categories must be used if a paid provider is present at the time of death.

<u>Exploitation (Of a Vulnerable Adult)</u> - As specified in A.R.S. §46-451(A)(5), the illegal or improper use of a vulnerable adult or his/her resources for another's profit or advantage.

7. "Human Rights Violation" means a violation of a Member's rights, benefits, and privileges guaranteed in the constitution and laws of the United States and the State of Arizona. Human Rights are defined in A.R.S. §36.551.01 as a violation of a Member's dignity or personal choice, violations of privacy, the right to open mail, send and receive phone calls, access to one's own money, choosing what to eat, etc.



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- 8. "Incident, Accident, Death" means an unexpected occurrence that harms or has the potential to harm a Member and is:
 - a. On the premises of a health care institution, or

- b. Not on the premises of a health care institution and directly receiving physical health services or behavioral health services from a personnel member who is providing the physical health services or behavioral health services on behalf of the health care institution as specified in A.A.C. R9-10-101.
- 9. "Independent Oversight Committee" means a committee established by state statute to provide independent oversight and to ensure the rights of certain individuals with developmental disabilities and persons who receive behavioral health services are protected as defined in A.R.S. §§41-3801, 41-3803, 41-3804, and A.A.C. R9-21- 105.

- 10. "Medication Error" means that one or more of the following has occurred:
- a. Medication Member given to the wrong person,

b. Medication given at the wrong time or not given at all,

c. medication or wrong Wrong medication dosage administered,



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144 d. Wrong method of medication administration, or Medication is given viathe wrong route or to the wrong person. 145 Inappropriate wastage of a Class II substance. 146 e. 147 "Member" means the same as "Client" as defined in A.R.S. § 36-551. 148 11. 149 150 Member - An individual receiving developmental disabilities services 151 administered by the Division. ¶ 152 Neglect (Of a Child) - As specified in A.R.S. §8-201, the inability or unwillingness of a parent, guardian or custodian of a child to provide that 153 154 child with supervision, food, clothing, shelter, or medical care. 155 156 Neglect (Of a Vulnerable Adult) -As specified in A.R.S. §46-451(A)(7), a pattern of conduct without the person's informed consent resulting in-157 deprivation of food, water, medication, medical services, shelter, cooling, 158 159 heating, or other services necessary to maintain minimum physical or 160 mental health. "Physical Abuse" means intentional infliction of pain or injury to 161 a Member. 162 "Programmatic Abuse" means aversive stimuli techniques not 13. 163

approved as part of a Member's plan. This can include isolation,



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restraints, or not following an approved plan or treatment strategy.

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14. "Provider" means, for—For the purposes of this Policy, any individual or entity that is engaged in the delivery of services to Division Members, or ordering or referring for those services, and is legally authorized to do so by the State in which it delivers the services, as specified in 42 CFR 457.10 and 42 CFR 438.2.

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AHCCCS or an AHCCCS Contractor.

- 15. "Sentinel Event" means an unexpected incident involving death, serious physical or psychological injury, or risk thereof.
- 177 16. "Serious Injury" means any—Any type of injury requiring medical care
 178 or treatment beyond first aid, such as assessmentasincluding, but not
 179 limited to: assessment or /treatment in an emergency room,
 180 treatment center, physician's office, urgent care or admission to a
 181 hospital.
 - 17. "Sexual Abuse" means any inappropriate interactions of a sexual nature toward or solicited from a Member with developmental disabilities.
 - 18. "Unexpected Death" means a sudden, unexpected deathDeath and may includefrom motor vehicle accidents, suicides, accidental drug overdoses, homicides, acute myocardial infarction or strokes, trauma,



sudden deathDeaths from undiagnosed conditions, or generic medical conditions that progress to rapid deterioration.

19. "Verbal/Emotional Abuse" means remarks or actions directed at a Member that are ridiculing, demeaning, threatening, derogatory, or profane.

<u>Vulnerable Adult</u> - As specified in A.R.S. §46-451(A)(10), an individual who is eighteen years of age or older and who is unable to protect himself/herself-from Abuseabuse, neglect, or exploitation by others because of a physical ormental impairment. Vulnerable adult includes an incapacitated person as defined in A.R.S. §14-1501.

POLICY

The AdSS shall develop and implement policies and procedures that require Provider providers to identify and report Incident, Accident and Death (IAD)s to the appropriate authoritative agencies, in accordance with the requirements specified in this policy. The AdSS may determine if Providers are required to enter reports directly into the AHCCCS Quality Management (QM) Portal or submit reports to the AdSS who will then enter the report into the AHCCCS QM Portal on behalf of the Provider.



A. MINIMUM REQUIREMENTS FOR IAD REPORTING

- The AdSS shall develop a process to ensure High Profile, media, and Sentinel events affecting members can be reported to the AdSS by Providers, Members, or Member's family, at any time, 24 hours a day, seven days a week, and that these communications are provided to the AdSS Quality Management Department.
- 2. The AdSS shall ensure that reportable IADs and Internal
 Referrals (IRFs)s are submitted within two business days48hours of the occurrence or within 48 hours of when the AdSS or
 provider receive notification to the AdSS of the occurrence via
 the AHCCCS Quality Management (QM) Portal.
 - 3. The AdSS shall ensure Sentinel IADs are shall be submitted via into-the AHCCCS QM Portal within one business day of the occurrence or becoming aware of the occurrence.
 - 4. The AdSS shall notify the Division and AHCCCS of all sentinel events via email at dddcareconcerns@azdes.gov and



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230		CQM@ahcccs.gov immediately, but within 24 hours of		
231		notif	ication of the occurrence.	
232	5.	The /	AdSS shall report An IADs are is reportedable that includeif	
233		they	it includes any of the following:	
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235		a.	Allegations of abuse, neglect, or exploitation of a Member.	
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237		b.	Allegations of Human Rights Violations.	
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239 240		C.	Substance use disorders or fopioid-related concerns.	
241		d.	Death of a Member.	
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243		e.	Delays or difficulties in accessing care (e.g., outside of the	
244			timeline specified in the Division's AdSS Operations Manual	
245			Policy 417) .	
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247	C	f.	Healthcare acquired conditions and other provider	
248	.0		preventable conditions as specified in(see the Division's	
249			AdSS Medical Manual Policy 960. and Policy 1020)	
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251		g.	Serious Injury.	



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253	h.	Injury resulting from the use of a personal, physical,
254		chemical, or mechanical restraint or seclusion as specified
255		in (see AMPM Division Medical Policy 962.)
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257	i.	Medication Error occurring at a licensed residential Provider
258		site including:
259	i	. Division Group Home,
260	::	Division Adult Davalanmental Home
261 262	ii	. Division Adult Developmental Home,
262 263	iii	. Division Child Developmental Home,
263 264	III	. Division Child Developmental Home,
265	iv	. Assisted Living Facility,
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267	V	. Skilled Nursing Facility,
268	vi	Pohavioral Hoalth Docidential Eacility
269 270	vi	. Behavioral Health Residential Facility,
270 271	vii	. Adult Behavioral Health Therapeutic Home,
272	VII	Addit Bellavioral frealth Therapeatic frome,
273	viii	Therapeutic Foster Care Home, or
274		Therapeacie rester care frome, or
275	ix	. Any other alternative Home and Community-Based
276	(0)	Services (HCBS) setting as specified in Division
277	0,	Medical Policy 1230-A.
278	V	: Behavioral Health Residential Facility, (BHRF), a Division
279		of Developmental Disabilities (DDD) Group Home, DDD
280		Adult or Developmental Home, DDD Child Developmental



home, Assisted Living Facility, (ALF), Skilled NursingFacility (SNF), Behavioral Health Residential Facility, AdultBehavioral Health Therapeutic Home, (ABHTH), or
Therapeutic Foster Care Home, (TFC), and any otheralternative Home and Community Based Service (HCBS)
setting as specified in the Division's Medical Manual Policy
1230-A. A medication error may include any one or moreof the following:

i. Administration of medication to the wrong

Inappropriate wastage of a Class II substance

member¶

i.

iii. Wrong method of medication administration¶

iv. Wrong dosage administered¶

Missed medication

j. MemberVulnerable adult or child missing person-from a licensed Behavioral Health Inpatient Facility, Behavioral Health Residential Facility, Division Group Home, Assisted

Living Facility, Skilled Nursing Facility, Adult Behavioral



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	Health Therapeutic Home, or Therapeutic Foster Care.
	meBehavioral Health Inpatient Facility (BHIF), BHRF, DDD
	Group Home, ALF, SNF, ABHTH, or TFC
k.	Member suicide attempt.
I.	Suspected or alleged criminal activity involving or affecting
	a Member.
m.	Community Complaint about a resident or the setting.
n.	Provider or Member fraud.
0.	Allegations of Physical, Sexual, Programmatic,
0.	Verbal/Emotional Abuse.
	Physical Abuseabuse means intentional infliction of pain or
	injury to a Membermember.
	Sexual Abuse means any inappropriate interactions of a
	sexual nature toward or solicited from a Membermember
	with developmental disabilities.¶
	Programmatic Abuse means aversive stimuli techniques
	not approved as part of a person's plan. This can include
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	isolation, restraints, or not following an approved plan-
	and/or treatment strategy.¶
	Verbal/Emotional Abuse means remarks, or actions
	directed at a Membermember enrolled in the Division that
	are ridiculing, demeaning, threatening, derogatory, or
	profane.
p.	Allegations of inappropriate sexual behavior.
q.	Theft or loss of Member's monies ey or property less than
	11 000
	\$1,000.
r.	Property damage estimated to be less than \$10,000.
S.	Community disturbances in which the Member or the
	public may have been placed at risk.
	Serious work-related illnesses or injuries of Division-
(.O.	employees
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	Threats to Division employees or state property and
	accidents on state property involving
	non-members/non-employees
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353		t.	Environmental circumstances which pose a threat to the
354			health, safety, or welfare of Members such as loss of air
355			conditioning, loss of water, or loss of electricity.
356		u.	Unplanned hospitalization or emergency room visit in
357			response to an illness, injury, Medication Error.
358		٧.	Unusual weather conditions or other disasters resulting in
359			an emergency change of operations impacting the health
360			and safety of a Member.
361 362		W.	Illegal substance Provider drug use by Provider or Member.
363		х.	Any other incident that causes harm or has the potential to
364			cause harm to a Member.
365	6.	The A	AdSS shall report IADs as a Sentinel Event if they IADs

include: any of the following:

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Member death or Serious Injury associated with missing



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Member suicide, attempted suicide, or self-harm that 370 b. results in Serious Injury, while being cared for in a 371 healthcare setting. 372 A 9-1-1 call due to a suicide attempt by a Member. 373 c. 374 Member death or Serious Injury associated with a d. 375 376 Medication Error. 377 Member death or Serious Injury associated with a fall while e. being cared for in a healthcare setting. 378 f. Any stage 3, stage 4, and any unstageable pressure ulcers 379 acquired after admission or presentation to a healthcare 380 381 setting or any other setting where the AdSS has oversight 382 responsibility. Member death or Serious Injury associated with the use of 383 seclusion or restraint while being cared for in a healthcare 384 385 setting. 386 Sexual Abuse or \(\nsigma \) assault of a Member during the provision h.

of services.



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389		i.	Death or Serious Injury of a Member resulting from a
390			physical assault that occurs during the provision or
391			services.
392		j.	Homicide committed by or allegedly committed by a
393			Member.
394		k.	A circumstance that poses a serious and immediate threat
395			to the physical or emotional well-being of a Member or
396			staff member.
397		1.	Severe physical injury that does any of the following:
398 399			i. Creates a reasonable risk of death,
400 401			ii. Causes serious or permanent disfigurement, or
402			iii. Causes serious impairment of a Member's or
403 404	Q.		iii. Causes serious impairment of a Member's or worker's health.
405	O _{i,o}	m.	Reporting to law enforcement officials because a Member is
406			missing and presumed to be in imminent danger.
407		n.	Reporting to law enforcement officials due to possession or
408			use of illegal substances by Members or Providers.



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Division of Developmental Disabilities
Administrative Services Subcontractors
Medical Policy Manual
Chapter 900
Quality Management and Performance
Improvement Program

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or is reported by the media.

An incident or complaint from the community that could be

- p. Property damage estimated in excess of \$10,000.
- q. Theft or loss of a Membermember's monies money or property in excess of of more than \$1,000.

AdSS shall develop and implement policies and procedures that include the following requirements:

- r. The AdSS shall submit and require its network of providers to submit sentinel IADs into the AHCCCS QM Portal within 24 hours of the occurrence. The AdSS shall notify the Division and AHCCCS of all sentinel events via email at CQM@ahcccs.gov as soon as possible, and no longer than 24 hours after notification of the occurrence.
- The AdSS shall develop a process to conduct an initial review of all IADs within one business day 24 hours of Provider provider submission. An initial review shall include the following:
 - Identification of any immediate health and safety concerns
 and ensure the that safety of the individuals involved in the



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incident, which may include that immediate care and recovery needs are identified and provided.

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- b. Determination if the IAD report needs to be returned to the Providerprovider for additional information, to correct inaccurate information, or yo provide missing information. (e.g., report is assigned to the wrong Contractor, enrollment category is not selected, incident type is not correct or not selected, information is missing or incorrect through the report).
- c. Determination if the IAD report requires further investigation through a quality of care investigation as specified in (see the Division's AdSS Medical Manual Policy 960.).
- Determination if the IAD needs to be linked to a corresponding Seclusion and Restraint Individual Reporting Form.
- e. Determination if the IAD report does not need further documentation or review, and closure of the report.



8. The AdSS shallis required to follow up on all IADs returned to the Providerprovider within one business day24 hours to ensure the Providerprovider is aware that the report has been returned and isare addressing the required corrections.

9. The AdSS shallis required to take immediateprompt actions to ensure the immediate-safety of Membermembers where allegations of harm, or potential harm, or immediate jeopardy exists regardless of status assigned to the IAD, including those returned to a Providerprovider.

10. The AdSS shallis required to reportensure that all suspected cases of Aabuse, Nneglect, orand Eexploitation of a Membermember isshall be reported to theall appropriate reporting authorities, by authorities, by if not reported directly by the Providerprovider, as specified in Division Operations Policy 6002-G. directly or by the AdSS if not completed by the provider, including but not limited to: Adult Protective Services, (APS), Department of Child Safety, (DCS), and the Arizona Department of Health Services. (ADHS).



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11. The AdSS shallis required to track and trend all IADs to identify and address systemic concerns or issues within their Provider provider network.

- 12. The AdSS shallmust submit reports to the Division describing the its track and trend activities as well as any systemic concerns or issues identified and how they were addressed.
- 13. The AdSS shall provide IAD reports to the appropriate

 Independent Oversight Committees (IOC) as specified in the

 Division's AdSS Medical Manual Policy 960. and A.R.S 41-3801 et

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Signature of Chief Medical Officer: